

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Petition for Penalty Relief of:)	
)	
)	
TERRY GLOBERSON, M.D.)	Case No. 8002014002696
)	
)	OAH No. 2014060920
Physician's and Surgeon's)	
Certificate No. G 36071)	
)	
Petitioner.)	
_____)	


DECISION

The attached Proposed Decision is hereby adopted by the Medical Board of California, Department of Consumer Affairs, State of California, as its Decision in this matter.

This Decision shall become effective at 5:00 p.m. on October 26, 2014.

IT IS SO ORDERED September 26, 2014.

MEDICAL BOARD OF CALIFORNIA


By: _____
Barbara Yaroslavy Chair
Panel A

BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Petition for Penalty
Relief of:

TERRY GLOBERSON, M.D.,

Petitioner.

Case No. 800-2014-002696

OAH No. 2014060920

PROPOSED DECISION

Alan S. Meth, Administrative Law Judge, Office of Administrative Hearings, State of California, heard this matter on August 14, 2014, in San Diego, California,

Terry Globerson, M.D., represented himself.

Karolyn M. Westfall, Deputy Attorney General, represented the Attorney General.

The matter was submitted on August 14, 2014.

FACTUAL FINDINGS

1. On January 18, 2014, Dr. Globerson signed a Petition for Penalty Relief and submitted it to the Medical Board of California (hereafter, "Board"). He seeks termination of probation.

2. On March 17, 1978, the Board issued license number G36071 to Dr. Globerson.

3. On February 10, 2011, the Board's Executive Director filed Accusation No. 04-2010-205947 against Dr. Globerson, alleging that he used alcoholic beverages and was under the influence of alcohol while working at a hospital on March 9, 2010.

The Board and Dr. Globerson entered into a Stipulated Settlement and Disciplinary Order, in which Dr. Globerson admitted the allegations in the accusation. The Board and Dr. Globerson further agreed that his license would be revoked, the revocation would be stayed, and Dr. Globerson would be placed on probation for four years on terms and conditions. In

addition to the Board's standard terms of probation, the disciplinary order provided that Dr. Globerson would abstain from the use of controlled substances and alcohol, undergo random biological fluid testing, undergo a medical evaluation, and have his practice monitored if he provided patient care. The Board adopted the Stipulated Settlement and Disciplinary Order on December 20, 2011, and it became effective January 19, 2011.

4. Dr. Globerson attended the University of Illinois, Champaign-Urbana, graduating in 1972, and attended Loyola University, Stritch School of Medicine. He graduated in 1975. From 1975 to 1978, Dr. Globerson did an internship and residency in internal medicine at the Medical College of Virginia, Virginia Commonwealth University. He did a fellowship in pulmonary disease at the University of California, Irvine, from 1978 to 1980. Dr. Globerson is board certified in internal medicine, with a subspecialty in pulmonary disease, and as a medical examiner.

In 1980, Dr. Globerson opened a private practice in Irvine doing internal medicine, pulmonary and critical care. In 2010, he worked for about a month for the Talbert Medical Group (Talbert) in Costa Mesa. Since September 27, 2010, Dr. Globerson has worked for Executive Health Resources (EHR) as a Physician Advisor.

From 1996 to 2005, Dr. Globerson served as a professor of medicine at UCI in the pulmonary division. He served as the Medical Director of respiratory services at the Irvine Regional Hospital and Medical Center (Irvine) and for 10 years served as the Medical Director of respiratory services at Chapman General Hospital in Orange, California. He was Chief of Staff at Irvine from 1993 to 1995 and has held numerous other hospital positions over the years. In 1980, Dr. Globerson wrote an abstract that was published in the American Review of Respiratory Disease.

5. Dr. Globerson wrote in his narrative statement that he was requesting early termination of probation because he had complied with all the terms and conditions of probation for more than three years and he had remained clean and sober for nearly four years. He pointed out that all of his drug tests have been negative and he adopted a sober and healthy lifestyle. He added that early termination of probation would remove the considerable costs associated with probation and would allow him to improve his career.

Dr. Globerson wrote that on March 10, 2010, while working for Talbert, he used alcohol before he went to work. Talbert immediately suspended him pending a blood test for alcohol, and then terminated him when the test came back positive. He noted that no patient was harmed by his alcohol use.

Dr. Globerson wrote that he realized he had an escalating problem with alcoholism after Irvine closed in 2009, his primary hospital for 20 years. After his termination from Talbert, he entered the Scripps McDonald Center treatment program. Dr. Globerson was an inpatient there for 28 days during March and April 2010. After completing the program, Dr. Globerson attended Alcoholics' Anonymous meetings on a daily basis and became sponsored by a physician who had 30 years of sobriety. Dr. Globerson wrote that he

attended weekly group therapy aftercare at St. Joseph Hospital and then met with the physician well-being committee at Orange Coast Memorial Hospital. He reported that at the committee's suggestion, he contacted the Pacific Assistance Group for continued substance abuse therapy and monitoring and joined the program on June 9, 2010.

Since Dr. Globerson was not employed at the time, he joined a fitness club and devoted his time to his sobriety and his physical and mental well-being.

Dr. Globerson wrote that in September 2010, he obtained a position as a physician advisor at EHR, a medical necessity review company. He attended a four-week training course in Pleasanton and while there, went to AA meetings every day. After the training ended, he began working remotely from his home in Irvine. His duties consisted of performing concurrent second-level medical necessity and compliance reviews for client hospitals throughout the country. He became a supervisor in February 2012, and his added duties include reviewing the work of 13 other physician advisors.

Dr. Globerson wrote that since he began his employment with EHR, he has maintained a balanced and healthy lifestyle. He wrote that he has embraced the AA program of sober living and now sponsors others. He indicated that he is mentally and physically fit, he hikes, he attends the theater, museums and concerts, and he has developed a circle of sober friends. He indicated he remains a fellow of the American College of Chest Surgeons and regularly reads medical journals and other training modules.

Dr. Globerson concluded his narrative by writing that he wanted early termination of his probation because he had recovered from alcoholism through his active and consistent involvement with AA. At the hearing, Dr. Globerson submitted an amended narrative in which he wrote that through his active and consistent involvement in AA, he had come to learn that he had to remain ever vigilant in order to maintain his sobriety. Dr. Globerson testified that in his original narrative, he was overzealous in describing his recovery and hopeful of persuading the Board that it could terminate probation. He testified he knew that a person could never be cured of alcoholism, it had to be continuously treated, recovery was a lifelong process, and he would never be able to drink again.

6. Dr. Globerson submitted a letter from James Profit, a counselor at the Scripps McDonald Treatment Center that indicated Dr. Globerson entered the program on March 23, 2010, and completed the full residential program on April 20, 2010. He described the program as having an educational component, individual therapy for relapse prevention, and a 12-step orientation process. He indicated that Dr. Globerson attended 12-step meetings and orientation activities and worked with a temporary sponsor.

7. Marsha Vanover, Ph.D. and LMFT, wrote a letter on behalf of the Pacific Assistance Group (PAG). She indicated she had been an independent contractor for the Board's diversion program for 11 years and served as a facilitator and participant in Diversion Evaluation Committee meetings until the Board terminated the program in 2008. She wrote that 10 of the facilitators from the diversion program formed PAG to perform

consultation and wellness evaluations and to provide the same services as diversion did but without the involvement of the Board.

Ms. Vanover wrote on August 3, 2011, that Dr. Globerson contacted PAG in June 2010, after he had completed the Scripps treatment program and asked to join PAG for monitoring and support purposes. Dr. Globerson then signed a two-year PAG contract and began attending twice weekly health support groups. He also started random drug and alcohol screening three to four times a month. She reported that Dr. Globerson had submitted 47 samples and all were negative, and there were no unexcused no shows for testing. She wrote that Dr. Globerson submitted verification of attendance at 12-step meetings that far exceeded the directives in the contract and he voluntarily came to her home once a month with his wife for a couples group.

Ms. Vanover wrote that she had more than 30 years of experience in the field of alcohol and drug dependency and recovery and in her opinion, Dr. Globerson was in true recovery and had accepted the AA fellowship and program of recovery. She believed Dr. Globerson was leading a sober healthy lifestyle and his participation in the program was for the sole purpose of improving his life and not in response to the accusation. She added that Dr. Globerson was an involved participant in support groups, offered support to others and was an excellent role model to his peers. She pointed out that what set Dr. Globerson apart from some of his peers was his immediate acceptance of needing recovery, his willingness to do whatever it took to maintain that recovery and his gratitude for all the positive changes he experienced in his life.

8. Dr. Globerson submitted CME certifications showing that he had earned numerous credits and in addition had completed courses at Johns Hopkins University School of Medicine in chest medicine (56 credits) in 2011 and Practical Reviews in Chest Medicine (88) credits in 2013.

9. Dr. Globerson submitted the following letters written in support of his petition:

a. Jeffrey Kaufman, M.D., a physician specializing in urology and surgery, wrote that he has known Dr. Globerson for more than 30 years and had worked closely with him over the years. He was also familiar with Dr. Globerson's problems with alcohol abuse. Dr. Kaufman believed that Dr. Globerson had overcome his problems with alcohol abuse and since coming to terms with his addiction, Dr. Globerson had displayed an impressive level of self awareness and understanding regarding his impairment, substance abuse, responsibility, healthy living and patient welfare. Dr. Kaufman wrote that Dr. Globerson had put forth an enormous effort to overcome his past problems and that he had seen a change in his attitudes. Dr. Kaufman wrote that Dr. Globerson has been a model for others hoping to overcome their demons and had faithfully committed himself to attending AA meetings and fulfilling the program. He believed Dr. Globerson was open and honest about his impairment and worked hard to insure it would not happen again. Dr. Kaufman reported that he had seen Dr. Globerson's performance at work, at home and in social situations and did not have any concerns about his mental health, sobriety or safety. He indicated Dr. Globerson had

remained clean and sober and did not represent a threat of falling off the wagon or resuming alcohol abuse again. Dr. Kaufman supported Dr. Globerson's effort to terminate probation early;

b. Joel Berman, M.D., has practiced general and vascular surgery for 39 years and had been sober in AA for 33 years. He wrote that he has known Dr. Globerson since February 2010, when Dr. Globerson came to him with his acute alcoholism problem. Dr. Berman reported that Dr. Globerson completed the program at Scripps and then voluntarily attended regular meetings with PAG. At about this time, Dr. Berman became Dr. Globerson's AA sponsor and reported that Dr. Globerson had been attending AA meetings regularly, going through all the steps, and sponsoring others. He indicated that they met on a weekly basis and he believed that Dr. Globerson remained sober and was following an excellent program of recovery.

Dr. Berman described Dr. Globerson as an honest, even-tempered, dependable, compassionate and grateful man who displayed the ideal in recovery from alcoholism. He noted that Dr. Globerson's family life had been on the verge of collapse in 2010 and it was now exemplary. He believed that if Dr. Globerson resumed clinical practice, he would be an excellent physician and he had no hesitation in recommending that the petition be granted;

c. Brian Rudick, M.D., is the Senior Medical Director of EHR and had worked with and supervised Dr. Globerson for more than three years. He wrote Dr. Globerson had been a consistent, reliable and dependable medical director with a deep fountain of medical knowledge. He indicated that Dr. Globerson's work was high quality and he was well respected by his peers. He described Dr. Globerson as an exemplary employee and strongly recommended that the petition be granted.

10. Dr. Globerson submitted numerous evaluations from EHR showing that he was an excellent employee.

11. Dr. Berman also testified at the hearing in support of Dr. Globerson. He testified that he was a recovering alcoholic with 34 years of sobriety and became one of the first physicians to enter the Board's diversion program in 1980. He then was appointed to the Board's Diversion Evaluation Committee where he served from 1984 to 1992.

Dr. Berman met Dr. Globerson at a time when Dr. Globerson was still drinking and having problems getting sober. He did not think that Dr. Globerson was ready to get into recovery and recommended that Dr. Globerson enter the Scripps program. Dr. Berman became his sponsor after he finished the program. He described Dr. Globerson as "most remarkable." He explained that Dr. Globerson went to AA meetings every day except when he was out of town, worked the steps, sponsored others, and probably did this more than anyone else he knew.

Dr. Berman testified he and Dr. Globerson meet about once a week to discuss the Big Book but before his recent move to Los Angeles, they met more frequently and attended the

same AA meetings every morning. Dr. Berman strongly believed, based upon his experience and his frequent meetings with him, that Dr. Globerson has not had anything to drink since he became Dr. Globerson's sponsor. He also believed that if Dr. Globerson maintained his program, he would be free of drugs and alcohol, and he saw no reason why Dr. Globerson would not continue his program. He described Dr. Globerson as happy with his work and stress-free.

12. Dr. Globerson testified at the hearing and admitted that he was disciplined by the Board for drinking while working at a hospital. He admitted that he drank before, during and after work, generally vodka, for a period of a few months. He testified that he began drinking heavily about two years before the March 9, 2010, incident and realized he had a drinking problem about a year later. Dr. Globerson did not believe he was ever intoxicated at work and stressed that he never harmed a patient. Dr. Globerson attributed his escalating drinking to the stress he experienced when the hospital he had worked in for 20 years closed and he then closed his own practice.

Dr. Globerson pointed out that he began his recovery before the Board initiated the disciplinary process and his early steps, including participating in the Scripps treatment program, adopting AA principles as his lifestyle, and obtaining a sponsor were entirely voluntary. His sobriety date is March 17, 2010. He testified he came to grips with his problem and spoke to Dr. Berman before he entered the Scripps program, and then every day when he was an inpatient. He testified that he began attending the bi-weekly PAG meetings that included testing, until probation began. He believed that by attending AA meetings as frequently as he did, he did not need to also attend the PAG meetings.

Dr. Globerson described a typical day as one beginning at about 4:00 a.m. when he got up and read meditations on his computer. At 5:00 a.m., he went to his gym and worked out until 6:30 a.m. and then went to an AA meeting, where he remained until 8:15. He generally worked from home from 8:30 a.m. to 5:00 p.m.

Dr. Globerson testified he found treatment was helpful and got him on track, and by attending AA meetings and admitting his powerlessness over alcohol and realizing that recovery was a lifelong process, he has been able to remain sober. He believed he was living a healthy lifestyle and was committed to his mental, physical and spiritual well-being. He thought that a relapse was a remote possibility and had no fear that he would relapse. He testified he has worked the steps of AA many times and continues to work them except the first step, which he did once, and his commitment to AA included sponsoring others.

Dr. Globerson testified he met a doctor at a PAG meeting who told him about EHR and that led to his employment with the company. He began doing reviews for hospitals all over the country and after a year he was promoted to a team lead position. In February 2012, Dr. Globerson was promoted to a supervisory position where he supervises other doctors and performs fewer reviews himself. Dr. Globerson testified he enjoyed the work and has flourished.

Dr. Globerson reiterated that he wanted probation to end because that would open more opportunities to him if he chose to leave EHR. He misses his patients although he does not miss the stress of operating a medical practice. He testified that drug testing is costly and inconvenient and limits his ability to travel.

13. Maricela Jimenez is Dr. Globerson's probation monitor. Her Intake Reports through the first quarter of 2014 disclosed no violations of probation. Dr. Globerson testified that he is current with his cost obligation.

14. The Attorney General opposed the petition.

LEGAL CONCLUSIONS

1. Dr. Globerson established he was rehabilitated. He presented substantial evidence that he does not represent a threat to the public.


Dr. Globerson has been licensed as a physician for more than 36 years and it was only during a short period of time, two years, that he abused alcohol. No evidence was offered to show Dr. Globerson's drinking caused any harm to patients or that his drinking resulted in any criminal convictions. Dr. Globerson's evidence of rehabilitation is substantial. Dr. Berman, who both wrote a letter in support of Dr. Globerson and testified at the hearing, and Ms. Vanover, have impressive credentials in the field of alcoholism and recovery. Both were truly impressed by Dr. Globerson's efforts at recovery and both believed that Dr. Globerson had been and would continue to be successful in his recovery. Dr. Kaufman who has known Dr. Globerson for more than 30 years and Dr. Rudick, Dr. Globerson's supervisor for the last three years, also strongly supported Dr. Globerson. Dr. Globerson testified convincingly that he was committed to his recovery and would continue to participate in AA and live a healthy lifestyle. There was no evidence to suggest otherwise and no reason to believe that terminating probation after nearly three years would endanger the public.

2. Cause to grant the petition for termination of probation was established by reason of the Factual Findings and Legal Conclusion 1.

ORDER

The application of Terry Globerson, M.D, for termination of probation is granted. Probation shall terminate on the effective date of this decision.

DATED: August 25, 2014



ALAN S. METH
Administrative Law Judge
Office of Administrative Hearings